

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <u>Cornell Long</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Jennifer Garrett Board of Pardons & Parole 301 South Ripley Street Montgomery, AL 36130		B. Received by (Printed Name) <u>CORNEIL LONG</u> C. Date of Delivery <u>1/9/06</u> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No <u>2:05CV 439-A</u> <u>@, and c + o 2/3/06</u>	
		3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number (Transfer from <u>7005 1820 0002 3461 4940</u>)		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

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1. Article Addressed to: Bobby Longshore Board of Pardons and Parole 301 South Ripley Street Montgomery, AL 36130		B. Received by (Printed Name) <u>CORNEIL LONG</u> C. Date of Delivery <u>1/9/06</u> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No <u>2:05CV 439-A</u> <u>C, and cmt + o 2/3/06</u>	
		3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number (Transfer from service label) <u>7005 1820 0002 3461 5008</u>		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
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1. Article Addressed to: Nancy McCreary Board of Pardons and Parole 301 South Ripley Street Montgomery, AL 36130			
2. Article Number (Transfer from) <i>7005 1820 0002 3461 4988</i>			
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1. Article Addressed to: Stephen McGill Board of Pardons and Parole 301 South Ripley Street Montgomery, AL 36130			
2. Article Number (Transfer from) <i>7005 1820 0002 3461 4971</i>			
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<p>1. Article Addressed to:</p> <p>Don McGriff Board of Pardons & Parole 301 South Ripley Street Montgomery, AL 36130</p>		<p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number (Transfer from ser) <i>7005 1820 0002 3461 4852</i></p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

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<p>1. Article Addressed to:</p> <p>Cliff Walker Board of Pardons and Parole 301 South Ripley Street Montgomery, AL 36130</p>		<p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number (Transfer from serv) <i>7005 1820 0002 3461 4964</i></p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

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<p>1. Article Addressed to:</p> <p>Sidney Williams Board of Pardons and Parole 301 South Ripley Street Montgomery, AL 36130</p>		<p>B. Received by (Printed Name) <i>CORNEILL LONG</i> C. Date of Delivery <i>1/9/06</i></p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No <i>2:05CV439-A</i> <i>C, and C + 8</i> <i>2/3/06</i></p>	
		<p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p><i>7005 1820 0002 3461 4995</i></p>	

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